

are still lacking coverage. It is worth repeating. Insurance for children is being used instead for adults. That is wrong, and the Kids First Act would ban such practices.

The CBO reports that our legislation will provide coverage to nearly 2 million low-income children who currently lack health insurance, and it does so in a fiscally responsible manner without raising taxes.

I know many of my Republican colleagues have other commonsense ideas to improve this legislation, and those will be offered. Republicans understand taxpayer resources are too scarce to be squandered away by waste, fraud or abuse. And Republicans are prepared to offer amendments to fix those problems and make the bill better.

For example, one provision of the bill allows a select few States to expand coverage to more than three times the Federal poverty level. Let me say that again. One of the provisions in the underlying bill allows a few States to expand coverage to more than three times the Federal poverty level. We don't think it is fair to provide special treatment to certain States, and we expect an amendment to address that situation.

The bill also provides Government health insurance to 2.4 million kids who already have health insurance, providing Government-paid insurance to kids who already have health insurance. Republicans believe those kids should be able to keep the coverage they have, and we will have amendments to let kids who already have health insurance keep that coverage, freeing more resources for kids who are actually in need.

Just as working families are trying to get the most out of every dollar, Republicans believe Government needs to do the same thing by rooting out waste, fraud, and abuse in all programs, including Medicaid and SCHIP.

These are a few of the ideas we will be discussing today and tomorrow as the Senate continues this very important debate.

I yield the floor.

RESERVATION OF LEADER TIME

The ACTING PRESIDENT pro tempore. Under the previous order, the leadership time is reserved.

CHILDREN'S HEALTH INSURANCE PROGRAM REAUTHORIZATION ACT OF 2009

The ACTING PRESIDENT pro tempore. Under the previous order, the Senate shall resume consideration of H.R. 2, which the clerk will report.

The legislative clerk read as follows:

A bill (H.R. 2) to amend title XXI of the Social Security Act to extend and improve the Children's Health Insurance Program, and for other purposes.

Pending:

McConnell amendment No. 40 (to amendment No. 39), in the nature of a substitute.

Grassley amendment No. 41 (to amendment No. 39), to strike the option to provide coverage to legal immigrants and increase the enrollment of uninsured low-income American children.

Mr. MCCONNELL. I suggest the absence of a quorum.

The ACTING PRESIDENT pro tempore. The clerk will call the roll.

The legislative clerk proceeded to call the roll.

Mr. BAUCUS. Madam President, I ask unanimous consent that the order for the quorum call be rescinded.

The ACTING PRESIDENT pro tempore. Without objection, it is so ordered.

AMENDMENT NO. 40

Mr. BAUCUS. Madam President, the amendment before us is the amendment offered by the Senator from Kentucky, Mr. MCCONNELL. It is a substitute amendment to the bill before us. The bill before us is an expansion of the Children's Health Insurance Program. It is very similar to the two bills that were taken up by Congress in 2007. Both were vetoed by President Bush. Both bodies had more than a majority. Both bodies passed the program. But the House did not get enough votes to override the President's veto.

The point is this is a very popular expansion of children's health insurance. The fact is we would add approximately 4 million more low-income, uninsured children who currently do not have health insurance.

Today about 6.7 million low-income kids have health insurance. Clearly, in this very difficult time of recession, parents are losing their jobs, their incomes are not what they once were. They have a hard time getting health insurance for their kids.

We took the same bill—actually, there were two bills last year, but they are very close—and mixed and matched a little bit, essentially the same bills that passed in 2007 which President Bush vetoed, and we are bringing up that same bill today, with one exception, and that is including perfectly legal alien citizens. They are not citizens but perfectly legal kids in America. Not illegals but legals.

The other side is opposing this bill because they do not want to include perfectly legal kids in the program. I think that is a big mistake because these children are here legally. Their parents pay taxes. If you are an 18-year-old, you could be drafted if we had a draft. These parents are in line to be full citizens after several years. They have green cards, but they will be full citizens. The perfectly legal folks in America receive food stamps. They are eligible for lots of things. They are in public school. It seems to me, therefore, they should be entitled to get health insurance, just like every other kid.

What this comes down to is either you are for low-income, uninsured kids getting health insurance or you are not. It is pretty simple. It is pretty basic. I believe, and I think most peo-

ple on this side of the aisle believe, therefore, the bill should pass and the substitute offered by the Senator from Kentucky, which does not include these children, should not be adopted.

The other difference is the bill before us will add about 4 million more children who are currently uninsured to the Children's Health Insurance Program. The amendment before us does not add that many. It adds about 2 million. Again, the point is, you are for kids or you are not for kids. I think the answer to that is pretty clear. We do want to add 4 million more low-income, uninsured kids to the Children's Health Insurance Program.

We are going to hear from the other side: Gee, the underlying bill crowds out private coverage; that is, some parents will say: Gee, if the addition passes, I can no longer insure my child with a private health insurance plan but, rather, go off private health insurance and go into the public program.

The point is, that is a national phenomenon that occurs in a lot of ways and in a lot of places. It occurs in Medicaid. For example, some person might be on private health insurance but Medicaid might be better. And if you compare the two bills; that is, the underlying bill and the substitute being offered, essentially they are the same in that about two-thirds of the additional children covered under the underlying bill will go on the public program and about one-third will come out from private coverage in the same proportion that occurs in the substitute amendment—lower numbers but the same proportion.

It just seems to me that the main underlying point is we want low-income, uninsured kids to have health insurance. That is what we want here. In the next several months and in the next year, probably, we will be doing health insurance reform, and then we can make sure private health insurance is bolstered so people who are not insured—46 million, 47 million people in America uninsured—will be able to get insurance either through the public program or private coverage.

It is a bit difficult to explain here, but the main point is if every American has to have health insurance and the low-income people have to have subsidies to get health insurance, that is something the Congress should do. But at this point here today, let's reject the substitute amendment. Why? Because, as I said, a lot of kids who are here, perfectly legally, won't get health insurance, and that is not right. It also doesn't go nearly as far as it should because there are so many kids who don't have health insurance here today but who should get it.

The ACTING PRESIDENT pro tempore. The Senator from Iowa is recognized.

Mr. GRASSLEY. Madam President, let me say to the Acting President pro tempore that it is a shame she has to be in the chair every time I give a speech, hearing the same things twice.